

## CLIENT SUCCESS STORY · CROSS-SELL EXPANSION

# One Partner. Four Service Lines.

Building a stronger foundation for enterprise transformation.

An Upper Midwest health system CDI · CODING & AUDIT · HIM · HEALTH IT

## 49%

CDI QUERY  
OPPORTUNITY RATE

## \$91,432

POTENTIAL CDI  
FINANCIAL IMPACT

## 90%

CODING  
AGREEMENT RATE

## +16

NET CC/MCC  
CODES IDENTIFIED

### — The Challenge

An Upper Midwest health system was preparing for major enterprise change, including Epic and Workday implementations and a transition off Cerner. At the same time, leaders needed to strengthen documentation integrity, coding quality, information governance, cybersecurity, infrastructure, and execution capacity, all without losing momentum in daily operations.

### — The Partnership

e4health brought together specialized leaders and delivery teams across four service lines. Each engagement addressed a defined need. Collectively, they created an integrated strategy to improve performance today while preparing the organization for tomorrow's technology ecosystem.



**The opportunity:** connect operational improvement with enterprise transformation through one accountable partner.

## — The Integrated Solution

From targeted support to enterprise-wide value, four coordinated service lines aligned around one transformation agenda.

|                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CDI</b><br>CLINICAL DOCUMENTATION                                                                                                                                                                                                                                                                                                                              | <b>Coding &amp; Coding Audit</b><br>MID-REVENUE CYCLE                                                                                                                                                                                                                                                                                                                         |
| <ul style="list-style-type: none"><li>• Comprehensive CDI audit across query opportunity, compliance, provider response, and documentation capture.</li><li>• Targeted recommendations for education, query governance, and CDI and Coding reconciliation.</li><li>• An actionable performance baseline to guide ongoing audit cadence and improvement.</li></ul> | <ul style="list-style-type: none"><li>• Inpatient coding quality audit across diagnoses, procedures, DRGs, POA indicators, and discharge disposition.</li><li>• High-risk DRG identification and focused coder education, plus coding support to sustain daily operations.</li><li>• A roadmap for repeat audits and trend monitoring toward a 95% accuracy target.</li></ul> |
| <b>HIM</b><br>HEALTH INFORMATION                                                                                                                                                                                                                                                                                                                                  | <b>Health IT</b><br>TECHNOLOGY & SECURITY                                                                                                                                                                                                                                                                                                                                     |
| <ul style="list-style-type: none"><li>• Interim HIM Director driving efficiencies across Health IT and mid-revenue cycle operations.</li><li>• MPI assessment and eMPI remediation to support the transition from Cerner to Epic.</li><li>• Digitization of ambulatory paper records so complete patient information lives in Epic or the archive.</li></ul>      | <ul style="list-style-type: none"><li>• Virtual CISO leadership to strengthen governance and security during the Epic and Workday go-lives.</li><li>• Networking resources to advance the infrastructure required to sustain new systems.</li><li>• Project and program management across ERP and Epic initiatives, coordinating risks and dependencies.</li></ul>            |

## — Measured Mid-Revenue Cycle Impact

|                                                                                                   |                                                                                                          |
|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <b>CDI AUDIT</b>                                                                                  | <b>INPATIENT CODING AUDIT</b>                                                                            |
| <b>75</b><br>records reviewed                                                                     | <b>900</b><br>code lines                                                                                 |
| <b>37</b><br>query opportunities                                                                  | <b>40</b><br>encounters                                                                                  |
| <b>21</b><br>capture opportunities                                                                | <b>90%</b><br>agreement rate                                                                             |
| <b>\$91,432</b><br>potential impact                                                               | <b>+16</b><br>net CC/MCC codes                                                                           |
| 95% timely initial reviews, 91% timely follow-up reviews, and no avoidable retrospective queries. | Focused opportunities in DRG accuracy, POA assignment, secondary diagnosis capture, and coder education. |

## — Why the Cross-Service Model Worked

Shared accountability connected clinical documentation, coding, information management, security, infrastructure, and program execution. Instead of treating each need as a stand-alone project, e4health aligned people, processes, data, and technology around a common transformation agenda.

### THE RESULT

A stronger operational foundation, clearer performance priorities, and coordinated support through one of the organization's most consequential periods of change.